PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

Effective October 1, 2003									10935503					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY			OTHER THAN OR SMALL ENTITY			
TOTAL CLAIMS			14				F	ATE	FEE	7	RATE	FEE		
FOR			NUMBER FILED I		NUM	BER EXTRA	BAS	IC FE	E 385.00	OR	BASIC FEE	770.00		
TOTAL CHARGEABLE CLAIMS			4 minus 20= *		• 0			S 9=		OR	X\$18=			
INDEPENDENT CLAIMS			2 minus 3 =)	 	43=	 	1	You			
м	JLTIPLE DEPE	NDENT CLAIM F	RESENT						 	OR	 	<u> </u>		
* If the difference in column 1 is less than zero, enter "("0" in (column 2	<u> </u>	45=	0.00	OR				
							TC	TAL	385	OR				
	C	(Column 1)	.MENDED - PART II (Column 2) (Column			(Column 3)	SM	ALL	ENTITY	OR	OTHER SMALL			
ENTA		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	ST SER USLY	PRESENT EXTRA	R/	TE.	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
AMENDMENT A	Total	*	Minus	**	•	=	XS	9=		OR	X\$18=			
	Independent	*	Minus	***		=	X	3=		OR	X86=	٠.		
Ĺ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									1	+290=			
								I5= OTAL		OR	TOTAL			
(Oaluma 4)									<u> </u>	JOR ,	ADDIT. FEE			
ENT B		(Column 1) CLAIMS REMAINING AFTER AMENDMENT	•	(Colum HIGHE NUMB PREVIOU PAID F	ST ER USLY	PRESENT EXTRA	RA	ΤE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
AMENDMENT	Total	•	Minus	**		=	X\$	9=		OR	X\$18≈			
WE	Independent	•	Minus	***		=	X4	3=		OR	X86=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-:-	\dashv	- 	l				
·							+14	DTAL		OR	+290= TOTAL	•		
								FEE		OR ,	DDIT. FEE	.,		
_		(Column 1) CLAIMS		(Columi		(Column 3)		· .			· · · · · · · · · · · · · · · · · · ·			
MEN		REMAINING AFTER AMENDMENT		NUMBE PREVIOU PAID FO	ER JSLY	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	*	Minus	6 16		=	X\$:	9=		OR	X\$18=			
	Independent	*	Minus	***		=	X43			ľ	X86=			
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							;= 		OR				
• If	 If the entry in column 1 is less than the entry in column 2, write "0" in column 3. 									OR	+290=			
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR A	TOTAL DDIT. FEE			
T	he *Highest Num	ber Previously Paid	For (Total or	Independen	l) is the l	highest number	found in th	е аррг	opriate box	in colu	mn 1.			